

<i>SERFF Tracking Number:</i>	<i>UNKP-125662902</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Milwaukee Casualty Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-CL-0809-01-398</i>		
<i>TOI:</i>	<i>35.0 Interline Filings</i>	<i>Sub-TOI:</i>	<i>35.0002 Commercial Interline Filings</i>
<i>Product Name:</i>	<i>Commercial Lines</i>		
<i>Project Name/Number:</i>	<i>/AR-CL-0809-01-398</i>		

Filing at a Glance

Company: Milwaukee Casualty Insurance Company

Product Name: Commercial Lines

SERFF Tr Num: UNKP-125662902 State: Arkansas

TOI: 35.0 Interline Filings

SERFF Status: Closed

State Tr Num: EFT \$50

Sub-TOI: 35.0002 Commercial Interline Filings

Co Tr Num: AR-CL-0809-01-398

State Status: Fees verified and received

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi,
Llyweyia Rawlins, Brittany Yielding

Authors: Denise Freund, Tyrone
Settlemer

Disposition Date: 06/05/2008

Date Submitted: 05/23/2008

Disposition Status: Approved

Effective Date Requested (New): 09/01/2008

Effective Date (New): 09/01/2008

Effective Date Requested (Renewal): 09/01/2008

Effective Date (Renewal):
09/01/2008

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number: AR-CL-0809-01-398

Domicile Status Comments:

Reference Organization: NA

Reference Number: NA

Reference Title: NA

Advisory Org. Circular: NA

Filing Status Changed: 06/05/2008

State Status Changed: 06/05/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Filing to adopt new and revised Company Jackets

Company and Contact

Filing Contact Information

SERFF Tracking Number: UNKP-125662902 *State:* Arkansas
Filing Company: Milwaukee Casualty Insurance Company *State Tracking Number:* EFT \$50
Company Tracking Number: AR-CL-0809-01-398
TOI: 35.0 Interline Filings *Sub-TOI:* 35.0002 Commercial Interline Filings
Product Name: Commercial Lines
Project Name/Number: /AR-CL-0809-01-398

Freund Denise, State Filings Analyst dfreund@unitrin.com
12790 Merit Drive (800) 777-2249 [Phone]
Dallas, TX 75251 (214) 360-8060[FAX]

Filing Company Information

Milwaukee Casualty Insurance Company CoCode: 26662 State of Domicile: Wisconsin
12790 Merit Drive Group Code: 215 Company Type: Prop & Cas
Dallas, TX 75251 Group Name: Unitrin Prop & Cas State ID Number:
(800) 777-2249 ext. 8194[Phone] FEIN Number: 39-1190263

SERFF Tracking Number:	UNKP-125662902	State:	Arkansas
Filing Company:	Milwaukee Casualty Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-CL-0809-01-398		
TOI:	35.0 Interline Filings	Sub-TOI:	35.0002 Commercial Interline Filings
Product Name:	Commercial Lines		
Project Name/Number:	/AR-CL-0809-01-398		

Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Milwaukee Casualty Insurance Company	\$50.00	05/23/2008	20475908

<i>SERFF Tracking Number:</i>	<i>UNKP-125662902</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>AR-CL-0809-01-398</i>		
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<i>Product Name:</i>	<i>Commercial Lines</i>		
<i>Project Name/Number:</i>	<i>/AR-CL-0809-01-398</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	06/05/2008	06/05/2008

<i>SERFF Tracking Number:</i>	<i>UNKP-125662902</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Milwaukee Casualty Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-CL-0809-01-398</i>		
<i>TOI:</i>	<i>35.0 Interline Filings</i>	<i>Sub-TOI:</i>	<i>35.0002 Commercial Interline Filings</i>
<i>Product Name:</i>	<i>Commercial Lines</i>		
<i>Project Name/Number:</i>	<i>/AR-CL-0809-01-398</i>		

Disposition

Disposition Date: 06/05/2008

Effective Date (New): 09/01/2008

Effective Date (Renewal): 09/01/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UNKP-125662902 State: Arkansas

Filing Company: Milwaukee Casualty Insurance Company State Tracking Number: EFT \$50

Company Tracking Number: AR-CL-0809-01-398

TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings

Product Name: Commercial Lines

Project Name/Number: /AR-CL-0809-01-398

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Company Cover Letter	Approved	Yes
Form	Commercial Lines Policy - Signature - SN,TK,MC	Approved	Yes
Form	Commercial Lines Policy Jacket - SN	Approved	Yes
Form	Commercial Lines Policy Jacket - MC	Approved	Yes
Form	Commercial Lines Policy Jacket - TK	Approved	Yes
Form	Trin Pac Commercial Lines Jacket - SN	Approved	Yes

SERFF Tracking Number:	UNKP-125662902	State:	Arkansas
Filing Company:	Milwaukee Casualty Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-CL-0809-01-398		
TOI:	35.0 Interline Filings	Sub-TOI:	35.0002 Commercial Interline Filings
Product Name:	Commercial Lines		
Project Name/Number:	/AR-CL-0809-01-398		

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type	Action	Action Specific Data	Readability	Attachment
Approved	Commercial Lines Policy - Signature - SN,TK,MC	31-3705	08 07	Other	New		0.00	SERFF 31_3705_08 07__TUK_SN_MC_Signature.pdf
Approved	Commercial Lines Policy Jacket - SN	31-3754	07 07	Other	New		0.00	SERFF 31_3754_07 07_SN.pdf
Approved	Commercial Lines Policy Jacket - MC	31-3755	07 07	Other	New		0.00	SERFF 31_3755_07 07_MC.pdf
Approved	Commercial Lines Policy Jacket - TK	31-3756	07 07	Other	New		0.00	SERFF 31_3756_07 07_TUK.pdf
Approved	Trin Pac Commercial Lines Jacket - SN	31-3749	08 07	Other	New		0.00	SERFF 31_3749_08 07_SN_TRIN_PAC.pdf

Read Your Policy Carefully

This policy is a legal contract between you and us. The information on this page is not the insurance contract and only the actual policy provisions will control. The policy sets forth in detail the rights and obligations of both you and us. **It is therefore important that you read your policy carefully.**

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of the policy.

This policy is signed by the President and Secretary of the insurance company and, if required by State law, this policy shall not be valid unless countersigned on the Declaration page by its authorized representative.

ABCD

Secretary

ABCDEFG

President

COMMERCIAL LINES POLICY



214-360-8000

**12790 MERIT DRIVE
DALLAS TEXAS 75251**

Security National Insurance Company

INSURANCE IS PROVIDED BY
THE COMPANY DESIGNATED ON THE
DECLARATIONS PAGE
(A Stock Insurance Company)

THIS POLICY CONSISTS OF:

- DECLARATIONS
- COMMON POLICY CONDITIONS
- ONE OR MORE COVERAGE PARTS, and
- APPLICABLE FORMS AND ENDORSEMENTS

COMMERCIAL LINES POLICY



214-360-8000

**12790 MERIT DRIVE
DALLAS TEXAS 75251**

Milwaukee Casualty Insurance Co.

INSURANCE IS PROVIDED BY
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DECLARATIONS PAGE
(A Stock Insurance Company)

THIS POLICY CONSISTS OF:

- DECLARATIONS
- COMMON POLICY CONDITIONS
- ONE OR MORE COVERAGE PARTS, and
- APPLICABLE FORMS AND ENDORSEMENTS

COMMERCIAL LINES POLICY



214-360-8000

**12790 MERIT DRIVE
DALLAS TEXAS 75231**

Trinity Universal Insurance Company of Kansas, Inc.

INSURANCE IS PROVIDED BY
THE COMPANY DESIGNATED ON THE
DECLARATIONS PAGE
(A Stock Insurance Company)

THIS POLICY CONSISTS OF:

- DECLARATIONS
- COMMON POLICY CONDITIONS
- ONE OR MORE COVERAGE PARTS, and
- APPLICABLE FORMS AND ENDORSEMENTS

COMMERCIAL LINES POLICY



214-360-8000

**12790 MERIT DRIVE
DALLAS TEXAS 75251**

Security National Insurance Company

INSURANCE IS PROVIDED BY
THE COMPANY DESIGNATED ON THE
DECLARATIONS PAGE
(A Stock Insurance Company)

THIS POLICY CONSISTS OF:

- DECLARATIONS
- COMMON POLICY CONDITIONS
- ONE OR MORE COVERAGE PARTS, and
- APPLICABLE FORMS AND ENDORSEMENTS

<i>SERFF Tracking Number:</i>	<i>UNKP-125662902</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Milwaukee Casualty Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-CL-0809-01-398</i>		
<i>TOI:</i>	<i>35.0 Interline Filings</i>	<i>Sub-TOI:</i>	<i>35.0002 Commercial Interline Filings</i>
<i>Product Name:</i>	<i>Commercial Lines</i>		
<i>Project Name/Number:</i>	<i>/AR-CL-0809-01-398</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number:	UNKP-125662902	State:	Arkansas
Filing Company:	Milwaukee Casualty Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-CL-0809-01-398		
TOI:	35.0 Interline Filings	Sub-TOI:	35.0002 Commercial Interline Filings
Product Name:	Commercial Lines		
Project Name/Number:	/AR-CL-0809-01-398		

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Approved	06/05/2008
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Comments:

Attachments:

SERFF F777_03_07.pdf

SERFF F778_03_07.pdf

Satisfied -Name:	Company Cover Letter	Review Status:	Approved	06/05/2008
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Comments:

Attachment:

SERFF Letter_Company_Forms.pdf

Property & Casualty Transmittal Document

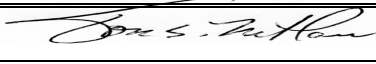
1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
g. SERFF Filing #:		
h. Subject Codes		

3. Group Name	Group NAIC #
Unitrin Property & Casualty Insurance Group	215

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Milwaukee Casualty Insurance Company	Wisconsin	26662	39-1190263	
Security National Insurance Company	Texas	19879	75-6020448	
Trinity Universal Insurance Company of Kansas	Kansas	15954	75-1413993	

5. Company Tracking Number	AR-CL-0809-01-398
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Jon Zetlau 12790 Merit Drive Dallas, TX 75251	Bureau/ Forms Compliance Manager	800/777-2249 ext 8034	214/360-8060	tsettlemer@unitrin.com
7.	Signature of authorized filer				
8.	Please print name of authorized filer		Jon Zetlau		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	35.0 Interline Filings
10. Sub-Type of Insurance (Sub-TOI)	35.0000 Interline Filings
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 09/01/08 Renewal: 09/01/08

15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	NA
17. Reference Organization # & Title	NA
18. Company's Date of Filing	May 22, 2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #	AR-CL-0809-01-398
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21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Filing to adopt new and revised Company Jackets/Signatures

22. Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: NA
Amount: NA

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)
 (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #		AR-CL-0809-01-398		
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)		NA		
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Commercial Lines Policy Jacket - Security National Ins.	31-3754 07 07	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	31-3705JF 08 06	
02	Commercial Lines Policy Jacket - Milwaukee Casualty Ins.	31-3755 07 07	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03	Commercial Lines Policy Jacket - Trinity Universal Ins.- Kansas	31-3756 07 07	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	31-3705JF 08 06	
04	Trin Pac Commercial Lines Policy Jacket - Security National Ins.	31-3749 08 07	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	31-3749JF 08 06	
05	Commercial Lines Policy - Signature Page (MC, SN,TK,Trin-Pac)	31-3705 08 07	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		



May 22, 2008

Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201-1904

Attn: Property and Casualty Division

RE: Commercial Lines – Company Forms
Milwaukee Casualty Insurance Company – NAIC #26662; FEIN #39-1190263
Security National Insurance Company – NAIC #19879; FEIN #75-6020448
Trinity Universal Insurance Company of Kansas – NAIC #15954; FEIN #75-1413993
Company Filing Number: AR-CL-0809-01-398

Dear Sir:

For all policies effective on or after September 1, 2008, we wish to adopt the following Company Jackets:

31-3754 07 07 Commercial Lines Policy Jacket – Security National Insurance Company
31-3755 07 07 Commercial Lines Policy Jacket – Milwaukee Casualty Insurance Company
31-3756 07 07 Commercial Lines Policy Jacket – Trinity Universal Insurance Company of Kansas
31-3749 08 07 Trin-Pac Commercial Lines Policy Jacket – Security National Insurance Co.
31-3705 08 07 Commercial Lines Policy – Signature Page – this includes a variable field for the President and Secretary signatures for Security National Ins., Trinity Universal Ins. of Kansas, and Milwaukee Casualty Ins.

The above Commercial Lines Policy Jackets, except Trin-Pac, are applicable to all lines of business.

The above forms replace the following previously approved Company forms:

31-3705JF 08 06 Commercial Lines Policy Jacket .
31-3749JF 08 06 Trin-Pac Commercial Lines Policy Jacket – Security National Insurance Co.

Filing forms are attached for your review. Copies of all Company Jackets are included.

Should you have any further questions or wish to discuss the matter further, please feel free to contact Tyrone Settlemier at (800) 777-2249 ext. 8034, tsettlemier@unitrin.com, or by mail.

Sincerely,

Jon Zetlau
Bureau and Forms Compliance Manager